

FOLLOW-ON DOCUMENT INDEX SHEET

<input type="checkbox"/>	CPFILE Request for Corrected Filing Receipt	<input type="checkbox"/>	PEFRSEQ Pre-Exam Formalities Sequence Reply	<input type="checkbox"/>	ACPA Continuing Prosecution Application	<input type="checkbox"/>
<input type="checkbox"/>	IFEE Issue Fee Transmittal PTOL 85 B	<input type="checkbox"/>	CRFD Computer Readable Form Defective	<input type="checkbox"/>	AF/D Affidavit or Exhibit Received	<input type="checkbox"/>
<input type="checkbox"/>	PEFR Pre-Exam Formalities Response	<input type="checkbox"/>	CRFE Computer Readable Form 'ENTERED'	<input type="checkbox"/>	AP.B Appeal Brief	<input type="checkbox"/>
<input type="checkbox"/>	PEFRREISS Pre-Exam Formalities Reissue Response	<input type="checkbox"/>	CRFL CRF Transfer Request	<input type="checkbox"/>	C680 Request for Corrected Notice/Allowance	<input type="checkbox"/>
<input type="checkbox"/>	A... Amendment Including Elections	<input type="checkbox"/>	CRFS Computer Readable Form Statement	<input type="checkbox"/>	COCIN Papers filed re: Certificate of Corrections	<input type="checkbox"/>
<input type="checkbox"/>	A.NA Amendment after Notice of Allowance	<input type="checkbox"/>	SEQLIST Sequence Listing	<input type="checkbox"/>	EABN Request for Express Abandonment	<input type="checkbox"/>
<input type="checkbox"/>	A.NE After Final Amendment	<input type="checkbox"/>	EARLYPUB Request for Early Publication	<input type="checkbox"/>	IRFND Refund Request	<input type="checkbox"/>
<input type="checkbox"/>	A.PE Preliminary Amendment	<input type="checkbox"/>	PGEA Req Express Aband to Avoid Publication	<input type="checkbox"/>	L_RIN Any Incoming L&R	<input type="checkbox"/>
<input type="checkbox"/>	REM Applicant Remarks in Amendment	<input type="checkbox"/>	PGA9 Req for Corrected Pat App Publication	<input type="checkbox"/>	N/AP Notice of Appeal	<input type="checkbox"/>
<input type="checkbox"/>	ELC. Response to Election/Restriction	<input type="checkbox"/>	PGREF Req for Refund of Publication Fee Paid	<input type="checkbox"/>	N417 Copy of EFS Receipt Acknowledgement	<input type="checkbox"/>
<input type="checkbox"/>	RCEX Request for Continued Examination	<input type="checkbox"/>	PGPUB DRAWINGS Box PG Pub Drawings	<input type="checkbox"/>	PROTEST Protest Documents Filed by 3rd Party	<input type="checkbox"/>
<input type="checkbox"/>	SPEC Specification	<input type="checkbox"/>	RESC Rescind Non-Publication Request	<input type="checkbox"/>	PROTRANS Translation of Provisional in Nonprov App	<input type="checkbox"/>
<input type="checkbox"/>	CLM Claim	<input type="checkbox"/>	XT/ Extension of Time filed separate	<input type="checkbox"/>	C.AD Change of Address	<input type="checkbox"/>
<input type="checkbox"/>	ABST Abstract	<input type="checkbox"/>	371P PCT Papers in a 371P Application	<input type="checkbox"/>	PA.. Change in Power of Attorney	<input type="checkbox"/>
<input type="checkbox"/>	DRW Drawings	<input type="checkbox"/>	IDS IDS including 1449	<input type="checkbox"/>	PC/I Power to Make Copies or to Inspect	<input type="checkbox"/>
<input type="checkbox"/>	OATH Oath or Declaration	<input type="checkbox"/>	FOR Foreign Reference	<input type="checkbox"/>	PET. Petition	<input type="checkbox"/>
<input type="checkbox"/>	ADS Application Data Sheet	<input type="checkbox"/>	NPL Non-Patent Literature	<input type="checkbox"/>	PET.WDISS Petition to Withdraw from Issue	<input type="checkbox"/>
<input type="checkbox"/>	APPENDIX Appendix	<input type="checkbox"/>	FRPR Foreign Priority Papers	<input type="checkbox"/>	PETDEC Petition Decision	<input type="checkbox"/>
<input type="checkbox"/>	ARTIFACT Artifact	<input type="checkbox"/>	DIST Terminal Disclaimer filed	<input type="checkbox"/>	LET. Miscellaneous Incoming Letter	<input type="checkbox"/>
<input type="checkbox"/>	COMPUTER Computer Program Listing	<input type="checkbox"/>	L_RACK L&R Access Acknowledgement	<input type="checkbox"/>	IMIS Miscellaneous Internal Document	<input type="checkbox"/>
<input type="checkbox"/>	SPEC NO Specification Not in English	<input type="checkbox"/>	ROCKET Request for Expedited (Rocket Docket)	<input type="checkbox"/>	RETMAIL. Mail Returned by Post Office	<input type="checkbox"/>
<input type="checkbox"/>	136A Blanket authorization to charge fees	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>





Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL For FY 2005 <input type="checkbox"/> Applicant Claims small entity status. See 37 CFR 1.27		Complete if Known		
		Application Number	10/699,784	
		Filing Date	11/04/03	
		First Named Inventor	FUKUDA et al.	
		Examiner Name	Williams, Alexander O.	
TOTAL AMOUNT OF PAYMENT (\$)		180	Attorney Docket No.	01-103-CON7

METHOD OF PAYMENT (check all that apply)

- ☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____
- ☒ Deposit Account Deposit Account Number: 50-1147 Deposit Account Name: Posz & Bethards, PLC
- For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
- ☐ Charge fee(s) indicated below ☐ Charges fee(s) indicated below, except for the filing fee
- ☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	<u>Small Entity</u> Fee (\$)	Fee (\$)	<u>Small Entity</u> Fee (\$)	Fee (\$)	<u>Small Entity</u> Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	160	80	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	<u>Small Entity</u> Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	18	9
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	88	44
Multiple dependent claims	300	150

Total Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)** **Multiple Dependent Claims**
0 - 20 or HP = 0 x \$50 = \$0 Fee (\$) Fee Paid (\$)

HP = highest number of total claims paid for, if greater than 20

Indep. Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)**
0 - 3 or HP = 0 x \$200 = \$0

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$ _____ (\$ for small entity)
for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.16(s).

Total Sheets **Extra Sheets** **Number of each additional 50 or fraction thereof** **Fee (\$)** **Fee Paid (\$)**
_____ - 100 = _____ / 50 = _____ (round up to a whole number) x _____ = \$0

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: Information Disclosure Statement Fee

\$180

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	37,701	Telephone	(703) 707-9110
Name (Print/Type)	DAVID G. POSZ	Date	February 22, 2005		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): FUKUDA et al.

Atty. Dkt.: 01-103-CON7

Serial No.: 10/699,784

Group Art Unit: 2826

Filed: November 4, 2003

Examiner: Williams, Alexander O.

Title: SEMICONDUCTOR DEVICE HAVING
RADIATION STRUCTURE

Commissioner for Patents
Alexandria, VA 22314

Date: February 22, 2005

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Sir:

Pursuant to 37 C.F.R. §1.56, the references listed on the attached Form PTO-1449 are being brought to the attention of the Examiner without any admission that they constitute statutory prior art, or without any admission that they contain subject matter that anticipates the invention or renders the invention obvious to a person of ordinary skill in the art.

As a first Office Action on the merits has been mailed in the above identified application, the fee due under 37 C.F.R. 1.17(p) is enclosed. Please charge any additional fee to Applicant's attorney's

Deposit Account No. 50-1147.

Respectfully submitted,

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FORM PTO-1449	ATTY. DKT NO.	01-103-CON7	SER. NO.	10/699,784
	APPLICANT	FUKUDA et al.		
	FILING DATE	November 4, 2003	GROUP	2826

REFERENCE DESIGNATION

U.S. PATENT DOCUMENTS

EXAMINER INITIAL		DOCUMENT NUMBER	DATE	NAME	CLASS	SUB CLASS
		6,555,052	04/2003	Soga et al.		
		6,426,877	07/2002	Baba		
		2003/0186072	10/2003	Soga et al.		
		2003/0166812	09/2003	Taniguchi et al.		

FOREIGN PATENT DOCUMENTS

TRANSLATION

		DOCUMENT NUMBER	DATE	COUNTRY	NAME	CLASS	SUB CLASS	YES	NO	
										Eng. Abstract
		2000-31355	01/2000	JAPAN						X
		10-65072	03/1998	JAPAN						X
		11-284103	10/1999	JAPAN						X

* Full English text is available in machine-translated form in JPO (Japanese Patent Office) English language web site at <http://www1.ipdl.jpo.go.jp/PA1/cgi-bin/PA1INDEX>.

OTHER REFERENCES (including Author, Title, Date, Pertinent Pages, etc.)

EXAMINER		DATE CONSIDERED

